

AMENDED IN ASSEMBLY APRIL 10, 2003

CALIFORNIA LEGISLATURE—2003–04 REGULAR SESSION

ASSEMBLY BILL

No. 1220

Introduced by Assembly Member Berg

February 21, 2003

~~An act to amend Section 104100 of the Health and Safety Code, An act to add Section 104141 to the Health and Safety Code, relating to disease prevention.~~

LEGISLATIVE COUNSEL'S DIGEST

AB 1220, as amended, Berg. Cardiovascular disease.

Existing law requires the State Department of Health Services to administer various programs related to disease prevention and health promotion, including a program for the control of high blood pressure.

~~This bill would make a technical, nonsubstantive change to these provisions.~~

This bill would create the Cardiovascular Disease and Stroke Prevention and Treatment Task Force within the department. The task force would be composed of 12 members, as specified, and would be required to perform a number of duties, including the creation of a Cardiovascular Disease and Stroke Prevention and Treatment State Master Plan. This bill would require the task force, by November 1, 2005, to submit the Master Plan to the Legislature, the Governor, and the department. This bill would also make implementation of its provisions contingent upon the appropriation of funds in the annual Budget Act or other statute.

Vote: majority. Appropriation: no. Fiscal committee: ~~no~~ yes. State-mandated local program: no.

The people of the State of California do enact as follows:

~~SECTION 1. Section 104100 of the Health and Safety Code~~

SECTION 1. The Legislature finds and declares the following:

(a) Cardiovascular disease is the number one cause of death and disability nationally.

(b) Heart disease alone is the number one killer, and stroke is the number three killer of Californians.

(c) More people die each year of cardiovascular disease than of the next five leading causes of death combined.

(d) This year the economic burden on the nation due to cardiovascular diseases and stroke is estimated to be over three hundred and fifty billion dollars (\$350,000,000,000).

(e) A cardiovascular disease and stroke prevention and treatment state master plan is needed to reduce the morbidity, mortality, and economic burden of cardiovascular disease and stroke in the state.

SEC. 2. Section 104141 is added to the Health and Safety Code, to read:

104141. (a) The Cardiovascular Disease and Stroke Prevention and Treatment Task Force is hereby created in the department.

(b) The task force shall be comprised of 12 members, as follows, who have demonstrated interest in cardiovascular disease or stroke:

(1) Three members appointed by the Speaker of the Assembly, as follows:

(A) One member representing a volunteer health organization dedicated to research and prevention of cardiovascular disease and stroke.

(B) One practicing physician with expertise in research, prevention, or treatment of stroke victims.

(C) One hospital administrator.

(2) Three members appointed by the Senate Committee on Rules, as follows:

(A) One representative of a population disproportionately affected by cardiovascular disease and stroke.

(B) One practicing physician with expertise in research, prevention, or treatment of cardiovascular disease.

1 (C) *One representative of a health care organization.*

2 (3) *Six members appointed by the Governor, as follows:*

3 (A) *One heart disease survivor.*

4 (B) *One stroke survivor.*

5 (C) *One registered nurse.*

6 (D) *One representative of a local health department.*

7 (E) *One member of a university facility with expertise in*
8 *programs intended to reduce the rate of cardiovascular disease*
9 *and stroke.*

10 (F) *One registered dietitian with experience in population*
11 *based programs.*

12 (c) (1) *Members of the task force shall be appointed on or*
13 *before March 1, 2004.*

14 (2) *Members shall serve without compensation, but shall be*
15 *reimbursed for necessary travel expenses incurred in the*
16 *performance of task force duties.*

17 (3) *On or before June 1, 2004, the task force shall meet and*
18 *establish operating procedures.*

19 (4) *A majority of the task force shall constitute a quorum for the*
20 *transaction of business.*

21 (5) *The task force shall be headed by a chairperson, selected by*
22 *the task force from among its members.*

23 (d) *The duties of the task force shall include, but not be limited*
24 *to, all of the following:*

25 (1) *Creating a comprehensive Cardiovascular Disease and*
26 *Stroke Prevention and Treatment State Master Plan that contains*
27 *recommendations to the Legislature, the Governor, and the*
28 *department. The Master Plan shall address changes to existing*
29 *law, regulations, programs, services, and policies, for the purpose*
30 *of improving cardiovascular disease and stroke prevention and*
31 *treatment in the state.*

32 (2) *Synthesizing existing information on the incidence and*
33 *causes of cardiovascular disease and stroke deaths and risks to*
34 *establish a profile of these deaths and risks in the state for the*
35 *purpose of developing the Master Plan.*

36 (3) *Publicizing the profile of cardiovascular disease and stroke*
37 *deaths and risks and their preventability in the state.*

38 (4) *Identifying priority strategies that are effective in*
39 *preventing, controlling, and treating risks for cardiovascular*
40 *disease and stroke.*

(5) Receiving and considering reports, data, and testimony from individuals, local health departments, community based organizations, voluntary health organizations, and other public and private organizations statewide in order to assess opportunities for collaboration as well as to identify gaps in cardiovascular disease and stroke prevention and treatment in the state.

(e) On or before November 1, 2005, the task force shall submit its plan to the Legislature, the Governor, and the department. Prior to issuing the plan, the task force may issue recommendations, as it deems necessary. Once the plan is submitted, the task force may revise and update the plan as necessary due to medical advances or other relevant information.

(f) The department shall provide staff support to the task force, and may apply for, accept, and spend any grants and gifts from any source, public or private, to support the requirements of this section.

(g) Implementation of this section shall be contingent upon funds appropriated in the annual Budget Act or other statute.

is amended to read:

~~104100. The Legislature finds and declares that high blood pressure, also known as hypertension, is a widespread and serious public health problem in California. This condition, when untreated, is a major contributor to heart disease, stroke, kidney disease, and related cardiovascular morbidity and mortality. Although high blood pressure can be effectively controlled through the use of now well established antihypertensive drugs, treatment is not always adequately utilized.~~

~~It is estimated that there are two million adults in California who have high blood pressure. It is further estimated, based on national data, that no more than 71 percent of all adult Californians with high blood pressure are aware of their condition, and that of those who are aware, only 40 percent are being effectively treated. Thus, of some two million California adults with high blood pressure, only about 568,000 have their condition adequately controlled. Unless the problem of uncontrolled high blood pressure among some 1,432,000 adults is promptly addressed, many of these individuals will experience preventable serious illness, disability, and death. In addition, the state will continue to face unnecessary medical and welfare costs resulting from high blood pressure and~~

1 ~~its resulting effects. Consequently, it is necessary to provide for~~
2 ~~expanded statewide efforts, interface with relevant federal~~
3 ~~legislation, establish and maintain appropriate guidelines, and~~
4 ~~enhance high blood pressure control activities at the community~~
5 ~~level. Coordination of local and state efforts in the planning,~~
6 ~~implementation, and evaluation of high blood pressure control~~
7 ~~activities is required, in order to improve allocations and~~
8 ~~utilization of resources to control high blood pressure in the states~~
9 ~~population.~~

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